

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2009		Application Number	10/516,419-Conf. #4959
		Filing Date	November 29, 2004
		First Named Inventor	Claude R. Mallet
		Examiner Name	R. J. Gitomer
		Art Unit	1657
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	60008(49991)
TOTAL AMOUNT OF PAYMENT	(\$)	1,300.00	

METHOD OF PAYMENT (check all that apply)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____			
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>04-1105</u>	Deposit Account Name: <u>Edwards Angell Palmer & Dodge LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES		
Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims Extra Claims Fee (\$) - 20 or HP x = Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20.	Multiple Dependent Claims Fee (\$) Fee Paid (\$) _____ _____
Indep. Claims Extra Claims Fee (\$) - 3 or HP x = Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3.	

3. APPLICATION SIZE FEE				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 =	/50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)		Fees Paid (\$)
Non-English Specification,	\$130 fee (no small entity discount)	
Other (e.g., late filing surcharge):	1252 Extension for response within second month	490.00
	1801 Request for continued examination (RCE) (see 37 ...	810.00

SUBMITTED BY			
Signature	/Nicholas J. DiCeglie, Jr./	Registration No. (Attorney/Agent)	51,615
Name (Print/Type)	Nicholas J. DiCeglie, Jr.	Telephone	(212) 308-4411
		Date	February 25, 2009